| TRANSMITTAL I | | Application No. | 09/520,378 | | |
|--|------------------------|--|---|--|--|
| TRANSIVII IAL I | | Filing Date | March 8, 2000 | | |
| (to be used for all correspondence a | tter initial filing) | First Named Inventor | Peter L. Froeberg | | |
| | | Art Unit | 2132 | | |
| | . 1 | Examiner Name | Lanier, Benjamin E. | | |
| Total Number of Pages in This Submi | ssion 6 | Attorney Docket Number | 2240P048C | | |
| ENCL | OSURES (chec | k all that apply) | | | |
| Fee Transmittal Form | Drawing(s |) | After Allowance Communicatio to Group | | |
| Fee Attached | Licensing | related Papers | Appeal Communication to Boar of Appeals and Interferences | | |
| Amendment / Response | Petition | | Appeal Communication to Grou (Appeal Notice, Brief, Reply Brief) | | |
| After Final Aftidavits/declaration(s) | Petition to Provisiona | Convert a I Application | Proprietary Information | | |
| Extension of Time Request | Power of A Change of | Attorney, Revocation f Correspondence Address | Status Letter | | |
| Express Abandonment Request | Terminal [| Disclaimer | Other Enclosure(s) (please identify below): | | |
| Information Disclosure Statement | Request fo | or Refund | To art we | | |
| PTO/SB/08 Certified Copy of Priority Document(s) | CD, Numb | er of CD(s) | | | |
| Response to Missing Parts/ Incomplete Application | Remarks | | RECEI | | |
| Basic Filing Fee | T TOTAL TOTAL | | SEP 02 | | |
| Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | Technology Ce | | |
| | RE OF APPLICA | NT, ATTORNEY, OR AG | ENT | | |
| Firm Chze Koon C | hua, Reg. No. 5 | 3.831 | | | |
| or | ,, | -, | | | |

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| 22010-1450. | | | |
|-----------------------|---|------|-----------------|
| Typed or printed name | Jennifer L. Stewart | | |
| Signature | toming stuart | Date | August 27, 2004 |
| | / (, , , , , , , , , , , , , , , , , , | | |

Based on PTO/SB/21 (04-04) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 06/04/2004. SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450

| ごとは TDANCM | ITTAI | Complete if Known | | | |
|---|------------------------|----------------------|---------------------|--|--|
| FEE TRANSM | HITAL | Application Number | 09/520,378 | | |
| for FY 20 Effective 01/01/2004. Patent fees are subject | 04 | Filing Date | March 8, 2000 | | |
| Effective 01/01/2004. Patent fees are subject | ct to annual revision. | First Named Inventor | Peter L. Froeberg | | |
| Applicant claims small entity status. See 37 CFR 1.27. | | Examiner Name | Lanier, Benjamin E. | | |
| <u> </u> | | Art Unit | 2132 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 110.00 | Attorney Docket No. | 2240P048C | | |

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|---|-------------|-------------------|-----------|----------|---|-----------------------|-------------------|-----------------------|
| METHOD OF PAYMENT (check all that apply) | | | | | E CALCULATI | ON (continu | ed) | |
| Check Credit card Money Other None | | ADDITIO | NAL | FEE: | 3 | | | |
| Deposit Account | | ge Entity | Sma | II Entit | , | | | |
| N Deposit Account | Fee | | Fee | Fee | _ | | | |
| Deposit Account 02-2666 | Code | ÷ (\$) | Code | (\$) | Fee | e Description | | Fee Paid |
| Number | 1051 | | 2051 | 65 | Surcharge - late filing | | | |
| Deposit | 1052 | 2 50 | 2052 | 25 | Surcharge - late provi cover sheet. | isional filing fee or | | |
| Account Name Blakely, Sokoloff, Taylor & Zafman LLP | 2053 | 130 | 2053 | 130 | Non-English specifica | ition | | |
| he Commissioner is authorized to: (check all that apply) | 1812 | | 1812 | 2,520 | For filing a request for | | nation | |
| Charge fee(s) indicated below Credit any overpayments | 1804 | 920 * | 1804 | 920 | | n of SIR prior to | | |
| Character of free and an arminal readers 27 | | | | | Examiner action | (0) | | |
| Charge any additional ree(s) or underpayment of rees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. | 1805 | 1,840° | 1805 | 1,840 | Requesting publication Examiner action | n of SIR after | | l . II. |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account | 1251 | 110 | 2251 | 55 | Extension for reply wit | thin first month | | |
| FEE CALCULATION | 1252 | | 2252 | 210 | Extension for reply will | thin second month | | |
| 1. BASIC FILING FEE | 1253 | | 2253 | 475 | | | | |
| Large Entity Small Entity | 1254 | | 2254 | 740 | Extension for reply wit | ; | | |
| Fee Fee Fee Fee Description Fee Paid | | | 2255 | 1.005 | Extension for reply wit | | | |
| Code (\$) Code (\$) | 1404 | | 2401 | 165 | Notice of Appeal | 1 ~ | 1.7 | |
| 1001 770 2001 385 Utility filing fee | 1402 | | 2402 | 165 | Filing a brief in suppo | rt of an appeal | | I |
| 1002 340 2002 170 Design filing fee | 1403 | | 2403 | 145 | Request for oral hear | 4 | : | |
| 1003 530 2003 265 Plant filing fee | 1451 | | 2451 | 1,510 | Petition to institute a | - 1 | fina : | |
| 1004 770 2004 385 Reissue filing fee | 1452 | | 2452 | 55 | Petition to revive - un | · ; | · , | ₩ |
| 1005 160 2005 80 Provisional filing fee | 1453 | | 2453 | 665 | Petition to revive - un | intentional | ECE | \mathbb{V} |
| SUBTOTAL (1) (\$) | 1501 | | 2501 | 665 | Utility issue fee (or rei | | | <u> </u> |
| 2. EXTRA CLAIM FEES Extra Fee from | 1502 | | 2502 | 240 | Design issue fee | | SEP 0 2 | 2004 - |
| 2. EXTRA CLAINIFEE Extra Fee from Claims below Fee Paid | 1503 | 640 | 2503 | 320 | Plant issue fee | | | |
| otal Claims X = X | 1460 | 130 | 2460 | 130 | Petitions to the Comm | nissioner TeC | hnology C | enter 21 0 |
| dependent aims X X = | 1807 | 50 | 1807 | 50 | Processing fee under | | | |
| ultiple Dependent = | 1806 | 180 | 1806 | 180 | Submission of Inform | ation Disclosure S | tmt | |
| Large Entity Small Entity | 8021 | 40 | 8021 | 40 | Recording each pater | nt assignment per | | |
| Fee Fee Fee Fee Description | 1 | | | | property (times numb | er of properties) | | |
| Code (\$) Code (\$) | 1809 | 770 | 1809 | 385 | Filing a submission af (37 CFR § 1.129(a)) | ter final rejection | | |
| 1202 18 2202 9 Claims in excess of 20 | 4040 | . 770 | 2042 | 205 | | | | |
| 1201 86 2201 43 Independent claims in excess of 3 | 1810 | 770 | 2810 | 385 | For each additional in examined (37 CFR § | | | |
| 1203 290 2203 145 Multiple Dependent claim, if not paid | 1801 | 770 | 2801 | 385 | Request for Continue | d Examination (RC | E) | |
| 1204 86 2204 43 **Reissue independent claims over original patent | 1802 | 900 | 1802 | 900 | Request for expedited | | | |
| 1205 18 2205 9 **Reissue claims in excess of 20 and over | Other | fee (specify) | ļ | | of a design application | n | | |
| original patent | | ,, | | Tem | ninal Disclaimer | | | 110.00 |
| SUBTOTAL (2) (\$) | ٦١ | | | | | | | |
| **or number previously paid, if greater, For Reissues, see below | - Reduce | ed by Basic Filin | g Fee Pai | a | : | SUBTOTAL (3) | (\$) | 110.00 |
| SUBMITTED BY | | | | | | Comr | olete (if applica | ble) |
| | T F | Registratio | on No. | | 52.021 | | | |
| Name (Print/Type) Chze Koon Chua | | Attomey/Age | | : | 53,831 | Telephone | (408) 947 | 7-0200 |
| Signature Kally et a | | | | | | | | |

Based on PTO/SB/17 (10-03) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 02/10/2004. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

| | 3 0 2004 | V 1 | • | | | | | |
|-----------------------------|--|-------------------|-------------|----------------------|---------------------|-------|--|--|
| FEE TRANSMITTAL for FY 2004 | | | | Complete if Known | | | | |
| 1 | FEE I RANSIN | 1114 | L | Application Number | 09/520,378 | eberg | | |
| 中 for FY 2004 | | | Filing Date | March 8, 2000 | _ | | | |
| ı | Effective 01/01/2004. Patent fees are subject | t to annual revis | sion. | First Named Inventor | Peter L. Froeberg | | | |
| ı | Applicant claims small entity status. See 37 CFR 1.27. | | | Examiner Name | Lanier, Benjamin E. | | | |
| ╌ | | | - | Art Unit | 2132 | | | |
| J | TOTAL AMOUNT OF PAYMENT | (\$) | 110.00 | Attorney Docket No. | 2240P048C | | | |

| METHOD OF PAYMENT (check all that apply) | | | | FE | EE CALCULATION (continued) | |
|---|----------------|------------------------------------|-----------------------|--------------|---|----------------|
| Check ☐ Credit card ☐ Money ☐ Other ☐ Nor | 3. A | ADDITIO | NAL | FEES | S | |
| Check Credit card Order Other Nor | | ge Entity | Sma | I Entity | у | |
| Deposit Account | Fee | Fee | Fee | Fee | <u>-</u> | 1 |
| Deposit | Code | (5) | Code | (\$) | Fee Description Fee P | aid |
| Account Number 02-2666 | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | $\neg 1$ |
| Deposit | 1052 | 50 | 2052 | 25 | | - |
| Account Blakely Sokoloff, Taylor & Zafman LLP | | | | | cover sheet. | _ |
| Name | 2053 1812 | | 2053 1812 | 130 2,520 | | |
| The Commissioner is authorized to: (check all that apply) | | 920* | ı | 920 * | | |
| Charge fee(s) indicated below Credit any overpayments | 1804 | 920 | 1804 | 920 | Examiner action | |
| Charge any additional fee(s) or underpayment of fees as required under 37 | 1805 | 1,840 * | 1805 | 1,840 * | * Requesting publication of SIR after | |
| CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge fee(s) indicated below, except for the filing fee | ,000 | , | ´ '' ⁸⁰³ | | Examiner action | |
| to the above-identified deposit account | 1251 | 110 | 2251 | 55 | Extension for reply within first month | - |
| FEE CALCULATION | 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1. BASIC FILING FEE | 1253 | | 2253 | 475 | Extension for reply within third month | |
| Large Entity Small Entity | 1254 | | 2254 | 740 | Extension for reply within fourth month | - |
| Fee Fee Fee Fee Fee Description Fee Pa | | | 2255 | 1,005 | | |
| Code (5) | 1233 | | l | | | |
| 1001 770 2001 385 Utility filing fee | 1404 | | 2401 | 165 | · · · · · · · · · · · · · · · · · · · | _ |
| 1002 340 2002 170 Design filing fee | 1402 | | 2402 | 165 | | _ |
| 1003 530 2003 265 Plant filing fee | 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1004 770 2004 385 Reissue filing fee | 1451 | 1,510 | 2451 | 1,510 | | !_ |
| 1005 160 2005 80 Provisional filing fee | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable RECEIV | |
| CURTOTAL (4) | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | -1 |
| SUBTOTAL (1) | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) SFP 0 2 20 | ΠĀ |
| 2. EXTRA CLAIM FEES Extra Fee from | 1502 | 480 | 2502 | 240 | Design issue fee | J 4 |
| Claims below Fee Pa | id 1503 | 640 | 2503 | 320 | Plant issue fee Toohaglagu | |
| Total Claims X = X | 1460 | 130 | 2460 | 130 | Plant issue fee Technology Cente | f-4 |
| Independent 3 = X = = | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| Multiple Dependent = | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | 1 |
| Large Entity Small Entity | 8021 | | 8021 | 40 | | |
| Fee Fee Fee Fee Description | "" | | | | property (times number of properties) | |
| Code (\$) Code (\$) | 1809 | 770 | 1809 | 385 | Filing a submission after final rejection | - |
| 1202 18 2202 9 Claims in excess of 20 | | | | | (37 ČFR § 1.129(a)) | |
| 1201 86 2201 43 Independent claims in excess of 3 | 1810 | 770 | 2810 | 385 | | _ |
| 1203 290 2203 145 Multiple Dependent claim, if not paid | | | l | | examined (37 CFR § 1.129(b)) | |
| 1204 86 2204 43 **Reissue independent claims over original | 1801 | 770 | 2801 | 385 | | |
| patent | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |
| 1205 18 2205 9 **Reissue claims in excess of 20 and over | | fee (specify) | • | | | |
| original patent | _ | | | Iem | minal Disclaimer110 | 0.00 |
| SUBTOTAL (2) (\$) | · Root | * Reduced by Basic Filing Fee Paid | | | SUBTOTAL (3) (5) 110 | |
| **or number previously paid, if greater, For Reissues, see below | | SLUY DOOL PET | yroord | • | SUBTOTAL (3) (5) 110 | .00 |
| SUBMITTED BY | | | | | Complete (if applicable) | = |
| | F | Registratio | on No. | Т. | | eg |
| Name (Print/Type) Chze Koon Chua | | Attomey/Age | | 5 | 53,831 Telephone (408) 947-820 | |
| Signature | | | | | Date 08/27/04 | |